									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003)	10/73/35/				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR		R THAN ENTITY	
TOTAL CLAIMS			U					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 385.0	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			[0, m]	inus 20=				X\$ 9:	=	OR	X\$18=		
INDEPENDENT CLAIMS			7 "	ninus 3 =	•			X43=		OR	X86=		
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT							OB	+290=		
• If the difference in column 1 is less than zero, enter "0" in column 2						1	TOTA		OR	TOTAL	m		
CLAIMS AS AMENDED - PART II											OTHER		
_		(Column 1)	(Colum			(Column 3)	olumn 3) SMAI		L ENTITY	OR	SMALL		
AMENDMENTA		REMAINING AFTER AMENDMENT		PREVIO	BEA JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE	-	RATE	ADDI- TIONAL FEE	
	Total	. 10	Minus	-01	\mathcal{D}	=		X\$ 9≈		OR	X\$18=	_	
	Independent	.2	Minus	2	2.	: -		X43=		OR	X86≃	_	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						t	+145=		OR	+290=		
	·							TOTA	u		TOTAL		
(Column 1) (Column 2) (Column 3)								ODIT. FE	E L	J~	ADDIT. FEE	<u> </u>	
AMENDMENT B		CLAIMS REMAINING AFTER		HIGHE NUMB PREVIO	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• / AMENDMENT	Minus	2	0	=	-	XS 9=	I FEE	OR	X\$18=	j	
	Independent	· á	Minus		3		·ŀ	X43=		OR	X86=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ŀ		+	1			
		•				•	L	+145=		OR	+290=		
		•		:			· Ai	DOIT, FEE	-1	JOR ,	DOIT, FEE		
		(Column 1)		(Colum		(Column 3)	_			_			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI 'PREVIOL PAID F	er Jsly	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		.	Γ	X\$ 9≃		оя	X\$18=		
E E	Independent		Minus	***		=	t	X43=		OR	X86=		
1	FIAST PRESE	NTATION OF MU	LTIPLE DEF	ENDENT (CLAIM		1						
+ 11	the entry in rot-	nn 1 je loce than th	e entry in ent-		O' in eat	umn 3	L	+145=		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL ODIT. FEE		
T	he "Highest Num	ber Previously Paid	For (Total or	Independen	i) is the	highest number	fourk	in the ap	propriate bo	x in colu	mn 1.	.	